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# Clark County Regional Support Network Policy Statement

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**Policy No.:** QM19  
**Policy Title:** Provider Agency Credentialing and Clinician Profiling  
**Effective Date:** September 1, 2001

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**Policy:** All CCRSN contracted providers of mental health services for the Clark County PIHP shall complete the CCRSN Credentialing Application annually and submit it together with the required documentation listed below. Providers shall also submit an updated Practitioner Report that lists the credentials, license and practice specialties of its clinical staff.

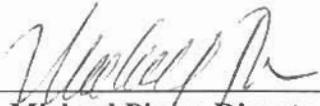
**Reference:** WAC 388-865-0284, Clark County Provider Contract Agreement, CCRSN Policy and Procedure QM19 Provider Agency Credentialing and Clinical Profiling and CCRSN Policy and Procedure QM19-A Credentialing Application, HIPAA

**Procedure:** Provider shall furnish the following information to the CCRSN for the Agency Credentialing file:

1. The following agency credentialing information must be submitted to the RSN along with two signed copies of the Provider Agreement:
  - a) ADA contact person
  - b) ADA facilities plan
  - c) Address, phone and fax numbers of service sites
  - d) After-hours crisis contact procedures
  - e) Agency complaint and grievance procedure
  - f) Contact person for complaint and grievance procedures
  - g) Contact person for Information Systems
  - h) Critical Incident/Extraordinary Occurrence Notification form
  - i) Current sliding fee scale and related policies
  - j) Drug free workplace policy
  - k) Interagency agreement with crisis services provider
  - l) List of formal and informal agreements with support systems indicating cross system working partnerships (i.e. schools, health district, DSHS)
  - m) List of all staff and telephone extension numbers, fax numbers, and e-mail addresses
  - n) A Practitioner Report that includes an updated list of clinicians, to include:
    - (1) Name
    - (2) Degree
    - (3) License or certification number

- o) Specialist designation and spoken language capabilities (e.g., minority specialist, children and youth, older adult, and designated ethnic minority special populations, languages spoken other than English)
  - p) Employee or contract status
  - q) Name of Medical Director and copy of license
  - r) Marketing/consumer education plan
  - s) MIS quality control plan
  - t) Quality management plan
  - u) Most recent audited financial statements
  - v) Name of contact person(s) for coordinating discharge planning for Clark County enrollees coming out of State facilities
  - w) Organizational chart
  - x) Training plan
  - y) Verification of insurance
  - z) Washington State Mental Health License
  - aa) Copy of all brochures
2. Policy and Procedures related to the protection of the rights of individuals, including:
- a) Section 504 of the Rehabilitation Act of 1973
  - b) Title VI of the Civil Rights Act of 1964
  - c) Confidentiality of Client records pursuant to Title 71 RCW.
  - d) Americans with Disabilities Act of 1990
  - e) Records Check laws and Regulations RCW 43.43.830 and 1989 Washington State Laws Chapter 334 regarding employee background check.
  - f) Child and Adult abuse reporting requirements as cited in RCW 26.44.030 and RCW 26.44.040.
3. CCRSN and Washington State Mental Health Division have identified cross system relationships as one of its priorities. Agencies shall provide a list of formal agreements and informal working relationships with the type of agreements identified. Any formal subcontracts for mental health services shall be submitted to CCRSN for review and approval.
4. The required documents need to be submitted initially, with the attached application, and resubmitted as changes occur at the agency, at least on an annual basis.
5. CCRSN may not discriminate against providers acting within the scope of their license or certification.
6. CCRSN may not employ or contract with any providers excluded from federal health care programs.
7. CCRSN staff shall retain the right to make periodic site visits during the contract period. At least two monitoring visits shall be completed annually.
8. Monitoring visits shall consist of, but not be limited to, the following
- a) Administrative review
  - b) Chart reviews
  - c) Policy and Procedure reviews

- d) Fiscal reviews
- e) Review of Quality Management Committee activities and projects
- f) Review of results of Federal, State or other relevant site review reports
- g) Review of compliance of confidentiality, including HIPAA regulations.

Approved By:  Date: 10-19-04  
**Michael Piper, Director**  
**Clark County**  
**Department of Community Services**